□ Fee Attached □ Amendment/Reply □ After Final □ Licensing-related papers □ Certificate of Correction of Confice Mistake (37 CFR 1.323) □ Certificate of Correction of Confice Mistake (37 CFR 1.323) □ Certificate of Correction of Confice Mistake (37 CFR 1.323) □ Appeal Communication to Convert to a Provisional Application □ Petition to Convert to a Reply Brief) □ Information Disclosure □ Certified Copy of Priority □ Terminal Disclaimer □ Appeal Communication to Convent(s) □ Response to Missing □ Request for Refund □ CD, Number of CD(s) □ Interferences □ After Allowance □ Communication to Group □ Response to Missing Parts under 37 CFR 1.52 or 1.53 □ David W Victor, Registration No. 39,867 □ Signature: □ David W Victor, Registration No. 39,867 □ The Commissioner is authorized to charge a deficiency of fees, or credit any overpayme to Deposit Account No. 50-3669 □ CERTIFICATE OF MAILING OR TRANSMISSION □ Thereby certify that this correspondence is being hand delivered to the United States Patent Office in an envelope address Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below:			0036.004
Inventor	TRANSMITTAL FORM	Application Number	09/378,648
Group Art Unit Stability Content Conten	(To be used for all PE		August 20, 1999
Group Art Unit Stabilitial filing AN 10 700 Examiner Name Michael L. Burleson	correspondence	Inventor	A.T. HINDS et al.
Examiner Name Attorney Docket Number BLD91999032US1	after initial filing MAY 10 2006	11	2626
Submission: 5 ENCLOSURES (check all that apply) Fee Transmittal Form	A STATE OF THE STA	Examiner Name	Michael L. Burleson
ENCLOSURES (check all that apply) Fee Transmittal Form	_	Attorney Docket Number	BLD91999032US1
□ Fee Attached □ Amendment/Reply □ After Final □ Affidavits / Declarations □ Extension of Time Request □ Express Abandonment Request □ Information Disclosure □ Statement; references □ Certified Copy of Priority Document(s) □ Response to Missing □ After Allowance □ Response to Missing □ Parts/Incomplete Application □ Response to Missing □ After Allowance □ Communication to Group □ After Allowance □ Communication to Group □ After Allowance □ Communication to Group □ After Allowance □ Response to Missing □ After Allowance □ After]	ENCLOSURES (check all that ap	pply)
Firm or Individual Name: David W Victor, Registration No. 39,867 Signature: Date: April 27, 2006 KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being hand delivered to the United States Patent Office in an envelope address Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below: Typed or Printed name: Customer No 46917	☐ Fee Attached ☐ Amendment/Reply ☐ After Final ☐ Affidavits /Declaration ☐ Extension of Time Request ☐ Express Abandonment Request ☐ Information Disclosure Statement; references ☐ Certified Copy of Priority Document(s) ☐ Response to Missing Parts/Incomplete Application ☐ Response to Missing Parts	application) □ Formal Drawings: sheets □ Licensing-related papers □ Petition: □ Petition to Convert to a Provisional Application 図 Change of Correspondence Address □ Terminal Disclaimer □ Request for Refund □ CD, Number of CD(s) □ After Allowance	□ Certificate of Correction of Office Mistake (37 CFR 1.322) □ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) □ Proprietary Information □ Status Letter □ Appeal Communication to Board of Appeals and Interferences 図 Fee Address Indication Form 図 Issue Fee Transmittal Form
Signature: Date: April 27, 2006 KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being hand delivered to the United States Patent Office in an envelope address Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below: Typed or Printed name: Customer No 46917	SIGNATUR	E OF APPLICANT, ATTORNE	CY, OR AGENT
Date: April 27, 2006 KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being hand delivered to the United States Patent Office in an envelope address Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below: Typed or Printed name: Customer No 46917	Firm or Individual Name:	David W Victor, Registration No. 3	9,867
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983 CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being hand delivered to the United States Patent Office in an envelope address Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below: Typed or Printed name: Customer No 46917	Signature:		
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I hereby certify that this correspondence is being hand delivered to the United States Patent Office in an envelope address Commissioner for Patents, Alexandria, VA 22313-1450, on the date indicated below: Typed or Printed name: Customer No 46917	315 South Beverly Drive, Suite 21 Beverly Hills, California 90212	OR, LLP The Complete Complet	y of fees, or credit any overpayment,
Typed or Printed name: Customer No 46917	CERTIF	ICATE OF MAILING OR TRAI	NSMISSION
46917	I hereby certify that this corresponder Commissioner for Patents, Alexandria	nce is being hand delivered to the United State a, VA 22313-1450, on the date indicated below	s Patent Office in an envelope addressed: w:
	Typed or Printed name:		Customer No.
	Signature:		46917
Date:	Date:		